BULLETIN SUBMISSION FORM

AROUND THE PARISH (*your news– event, reminder, class, social, Thank you, etc.)*

_____

DATE(S) TO RUN_____*(maximun 2 weeks)*
PERSON(S) TO CONTACT *(name/phone/email)*

_____

WHAT IS HAPPENING

_____

_____

_____

_____

_____

_____

_____

_____

_____

WHEN(*DATE)*

_____

_____

WHY(*PURPOSE)*

_____

_____

HOW (*DIRCTION)*

_____

_____

ANY INFORMATION YOU WANT INCLUDED IN ADDITION TO ABOVE INFORMATION:

_____

_____

_____

_____

DO YOU WANT THIS EVENT ADDED TO THE MONTHLY CALENDAR YES NO (*CIRCLE ONE)*